

- WIC will collaborate with Title V/FHA and Medicaid to improve referrals and access to WIC services for children with special health care needs.

C. Pregnant Women and Infants

- FHA/MCH programs will assure a local point of entry for all under/uninsured pregnant women and will link these women with providers willing to serve patients on a sliding scale basis.
- FHA programs will verify Medicaid eligibility prior to providing services and refer pregnant and postpartum women and infants who are potentially eligible for Medicaid/MCHP for eligibility determination.
- Medicaid and FHA programs will coordinate hotline activities to share information and assure that callers are referred to the appropriate services.
- Medicaid will refer pregnant women and infants that are not eligible for Medicaid or MCHP to Title V programs.
- Medicaid, FHA/MCH programs, and their respective grantees, will encourage OB providers to complete the Maryland Prenatal Risk Assessment and refer high-risk pregnant women to the Healthy Start program.
- Medicaid and FHA Programs will refer pregnant and postpartum women to WIC.

D. Family Planning

- FHA programs and Medicaid will collaborate on strategies to increase utilization of family planning services, especially among women enrolled in managed care and the Medicaid Family Planning Waiver.
- Medicaid will ensure that eligible women whose Medicaid pregnancy-related benefits have ended are enrolled in the Medicaid Family Planning waiver.
- FHA/FP programs will refer Medicaid Family Planning waiver clients to primary care providers for services provided on a sliding scale basis.
- Medicaid will refer women who lose family planning waiver eligibility to Title X/FP programs who serve women on a sliding scale basis.

E. WIC

- Medicaid, through its grantees, hotlines, and managed care providers, will refer pregnant and postpartum women, infants and children to WIC.
- WIC will accept verification of Medicaid eligibility as proof of financial eligibility for WIC services.

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- WIC will link families to Medicaid/MCHP, Title V, and Title X services and other health-related and social services for children with special health care needs.
- WIC will identify outreach networks; distribute literature and perform targeted community outreach publicizing program availability.
- WIC and Medicaid will coordinate to ensure that information about the WIC program is available in areas where Medicaid/MCHP applications are processed.

V. TRAINING AND TECHNICAL ASSISTANCE

A. Primary and Preventive Care for Children

- Medicaid will train LHD staff in the processing of Medicaid and MCHP applications.
- Medicaid will provide training and technical support to LHD grantees related to Medicaid administrative functions, such as outreach, care coordination.
- FHA programs and Medicaid will collaborate to provide training, consultation, and technical assistance to Medicaid, Title V and Title X providers in the delivery of home visiting and case management services and other health services for children at-risk.
- FHA/Oral Health will provide oral health educational materials for providers, clients, LHDs, family planning clinics, the WIC Program, MCOs and organizations, such as Head Start.

B. Children with Special Health Care Needs

- Medicaid and FHA/CSHCN will collaborate to provide training, consultation and technical assistance to Medicaid, Title V and Title X providers regarding the delivery of home visiting and case management and other health services for children with special health care needs.
- FHA/CSHCN will provide technical assistance to Medicaid regarding therapy and audiology services
- FHA/CSHCN will conduct, through its grantees, targeted provider education regarding programs and services, such as the Newborn Screening Program, Infant Screening Hearing Program, and Genetic Services Network and will make educational materials about these services available to Medicaid.

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C. Pregnant Women and Infants

- Medicaid and FHA will collaborate to provide training, consultation and technical assistance to Medicaid, Title V and Title X providers in the delivery of home visiting and case management and other health services for pregnant women and infants.
- Medicaid and FHA will collaborate on the production of outreach materials to be used by FHA programs, Medicaid, providers and staff to assure that Medicaid and MCHP information is included.
- Medicaid will train LHD staff in the processing of Medicaid applications for pregnant SOBRA eligible women.

D. Family Planning

- FHA programs and Medicaid will collaborate to provide training, consultation and technical assistance to Medicaid, Title V and Title X providers in the delivery of comprehensive family planning services.
- FHA/FP will sponsor the Annual Reproductive Health Update for Title X, Title V, and Medicaid providers.

E. WIC

- WIC will educate provider groups about the WIC Program through meetings, conferences, and periodic distribution of WIC provider education packet.
- Medicaid will ensure that WIC is apprised of eligibility income standards and will work to streamline the eligibility verification process.

VI. PROVIDER CAPACITY

A. Primary and Preventive Care for Children

- FHA programs and Medicaid will collaborate to recruit and retain medical and dental providers willing to serve children on Medicaid and MCHP.
- FHA programs will refer providers interested in serving the Medicaid population to MCOs to negotiate contracts.

B. Children with Special Health Care Needs

- FHA/CSHCN and Oral Health will work with Medicaid to increase specialty pediatric dental providers.

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- FHA/CSHCN will collaborate with Medicaid to ensure that there are sufficient OT, PT, Speech, and Audiology providers, and other specialty care providers that are willing to treat Medicaid, MCHP and the un/underinsured population.

C. Pregnant Women and Infants

- Medicaid and FHA programs will collaborate to recruit and retain providers to serve women and infants enrolled in Medicaid/MCHP and the uninsured.
- Medicaid and FHA programs will encourage perinatal providers to link their prenatal clients with pediatricians prior to delivery to assure access to care for newborns.
- FHA programs and Medicaid will work with perinatal providers, hospitals and birthing centers to assure the adequacy of primary, secondary and tertiary care.

D. Family Planning

- FHA/FP and Medicaid will collaborate to ensure that there are sufficient family planning providers willing to serve women enrolled in Medicaid/MCHP.
- FHA/FP will ensure that there are providers willing to serve uninsured/under insured clients on a sliding scale basis.

E. WIC

- WIC will ensure that there are sufficient WIC vendors Statewide.
- WIC will ensure that the local WIC sites are located in proximity to potential WIC-eligible and WIC clients (community-based, hospitals, LHD)

VII. SYSTEM INTEGRATION

A. Primary and Preventive Care for Children

- FHA and Medicaid will collaborate to establish and maintain relationships with providers who serve low-income and Medicaid/MCHP enrolled children and to help facilitate problem resolution.
- Medicaid and FHA will collaborate to assure that there are public forums for exchange of information such as the Medicaid Advisory Committee, Oral Health Advisory Committee and other ad hoc advisory groups.

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B. Children with Special Health Care Needs

- FHA/CSHCN, in coordination with the Centers of Excellence, will work to identify, recruit and retain providers willing to participate in the Genetic Services Network and conduct targeted provider education and outreach regarding services available.
- FHA/CSHCN will work to increase the awareness among specialty care providers of the role of the MCO Special Needs Coordinators and how to refer families to this resource.
- FHA/CSHCN in collaboration with MSDE Infants and Toddlers Program will inform providers about the Newborn Hearing Screening Program and assure referrals are made for follow-up services.
- Medicaid will ensure that MCOs provide medically necessary specialty services to children.

C. Pregnant Women and Infants

- FHA programs and Medicaid will work to ensure that there is a process in place to link women with appropriate services in all Maryland jurisdictions.
- Medicaid and FHA/MCH will partner with perinatal providers to facilitate access to care, tracking of, and management of pregnant women.
- Medicaid and FHA/MCH will encourage all prenatal care providers to complete the Maryland Prenatal Risk Assessment form and refer high-risk women to Healthy Start.
- Medicaid and FHA/MCH will work to enhance partnerships between obstetricians and pediatricians to make care more seamless from pregnancy through delivery.
- Medicaid and FHA/MCH will collaborate to establish and maintain relationships with perinatal providers and help facilitate problem resolution.

D. Family Planning

- Medicaid and FHA/FP will collaborate to establish and maintain relationships with providers, inform providers of the self-referral option for family planning services and help facilitate problem resolution.
- FHA/FP, Medicaid, and their respective grantees will assist providers with linkages and resources for family planning clients to access primary care services.

E. WIC

- WIC will partner with FHA programs and Medicaid to integrate WIC eligibility and application process into provider practice patterns.

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- WIC, Medicaid, FHA programs, will collaborate to identify opportunities to improve service delivery.
- WIC staff will assure that appropriate referrals are made health and social services.

VIII. QUALITY ASSURANCE ACTIVITIES

A. Primary and Preventive Care for Children

- Medicaid will ensure that MCOs complete the required quality assurance activities and share results with FHA programs as appropriate (External Quality Review Organization "EQRO" Audit, analysis of Health Plan Employer Data and Information set "HEDIS" measures, Consumer Assessment of Health Plans "CAHPS" survey, encounter data, and value-based purchasing initiatives).
- FHA programs and Medicaid will share quality assurance reports and findings, (i.e. audits, customer satisfaction surveys).
- Medicaid will work with FHA programs in the development of the EPSDT periodicity schedule and quality standards for the care of children.
- Medicaid will offer EPSDT training to Medicaid providers rendering primary care to children under age 21 and perform periodic medical record audits to ensure that children are getting the appropriate services.
- Medicaid will perform periodic audits of LHD home visiting and case management services delivered to high-risk infants and toddlers.
- Medicaid will collaborate with FHA/MCH regarding maternal, fetal, infant and child death reviews.

B. Children with Special Health Care Needs

- FHA/CSHCN and Medicaid will collaborate on initiatives to improve the accessibility to specialty services and the quality of those services.
- FHA/CSHCN will perform contract monitoring and administrative oversight for Title V funded case management services performed in local health departments.
- FHA/CSHCN will perform contract monitoring and administrative oversight for the Model Day Care centers.
- FHA/CSHCN will participate in the review of IFSP and IEP school-health related services covered by Medicaid.
- FHA/CSHCN will assist Medicaid with preauthorization and medical review to determine necessity/appropriateness for specialty Medicaid services.

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- Medicaid will consult with FHA/CSHCN to ensure that therapists and other specialty providers meet minimum quality standards and have the appropriate certification and credentials.

C. Pregnant Women and Infants

- FHA/MCH will include Medicaid as a participant in strategic planning related to Title V initiatives, such as Maternal and Infant Mortality and Racial Disparities, and the development of and periodic review of Perinatal Systems Standards.
- Medicaid will ensure that MCOs complete the required quality assurance activities and share results with FHA programs as appropriate (External Quality Review Organization "EQRO" Audit, analysis of Health Plan Employer Data and Information set "HEDIS" measures, Consumer Assessment of Health Plans "CAHPS" survey, encounter data, and value-based purchasing initiatives).
- FHA and Medicaid will share quality assurance reports and findings, (i.e. audits, customer satisfaction surveys).
- FHA/MCH will work to ensure that all perinatal providers are aware of findings from Maternal, Fetal, and Infant Mortality Reviews.
- Medicaid will perform periodic audits of LHD home visiting and case management services delivered to pregnant and postpartum women.

D. Family Planning

- FHA/FP and Medicaid will collaborate on the development of QA activities relevant to family planning services.
- FP will include Medicaid as a participant in regional family planning meetings and Title X reviews.

E. WIC

- WIC will include Medicaid as a participant in WIC strategic planning initiatives.
- WIC, through its Advisory Council, will assure that the unique needs of Medicaid recipients are considered in customer service and quality improvement initiatives.

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EFFECTIVE DATE

This COOPERATIVE AGREEMENT is effective upon the signatures of the authorized officials of the Family Health Administration and the Maryland Medical Assistance Program. It shall remain in effect for a period of five years from the date the COOPERATIVE AGREEMENT is signed, or until either party provides written notification of termination. Termination notice shall be given to the other party at least 30 days in advance of the termination date.

MODIFICATIONS

The parties below, or their designees may enter into supplements and modifications to this agreement jointly.

Agreement Acceptance by Signature:

Nelson J. Sabatini
Nelson J. Sabatini, Secretary
Department of Health and Mental Hygiene

7/22/04

Russell W. Moy
Russell W. Moy, MD, MPH, Director
Family Health Administration

7-22-04

Date

Susan J. Tucker
Susan J. Tucker, Executive Director
Office of Health Services
Medical Assistance Program

7/22/04

Approved as to Form and Legal Sufficiency, this 23rd day of July 2004,
By

Elizabeth M. Kameen
Elizabeth M. Kameen
Assistant Attorney General

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